



nder the Paperwork Reduction Act or 1990, no persons are require	d to respond to a collection or into	imation unless it displays a valid ONIB control number		
CHANGE OF	Application Number	09/909,838		
CORRESPONDENCE ADDRESS  Application	Filing Date	July 20, 2001		
	First Named Inventor	Andrei W. KONRADI		
Address to:	Art Unit	1624		
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Examiner Name	B. Kifle		
	Attorney Docket No.	428372001700		

		1 . 5 . 4 . 1	1 475	- I' A'			
	the Correspondence Add	tress for the above-	dentified app	olication			
to:				<del></del>			
X Cu	stomer Number	38706					
		Customer Number		_			
OR							
		<del></del>		Cus	tomer Number	er Bar Code	
Firm or Individual Name							
Address							
City			State		Zip		
Country							
Telephone				Fax			
data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  X Attorney or Agent of record.  Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number							
Typed or Printed Go	erald F. Swiss Reg. No	o. 30,113					
Signature Large & Jums							
Date 10 -	9-03						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
X *Total of	1 forms are sub	mitted.					